

City of Loveland Building & Zoning  
 120 W. Loveland Ave.  
 Loveland, Ohio 45140  
 www.lovelandoh.gov  
 (O) 513-707-1447 (F) 513-583-3032

**RESIDENTIAL BUILDING/  
 ZONING PERMIT APPLICATION**  
 RESIDENTIAL: 1, 2, 3 FAMILY  
 PLEASE PRINT, USE BALL POINT PEN OR TYPE

<b>PERMIT NUMBER</b>



1. PERMIT SITE ADDRESS: \_\_\_\_\_ FLOOD ZONE: no yes

2. COUNTY:      Hamilton      Clermont      Warren

3. TENANT LOCATION: Floor \_\_\_\_\_ Suite \_\_\_\_\_ Unit \_\_\_\_\_ Lot \_\_\_\_\_ Business name \_\_\_\_\_

	NAME	ADDRESS - CITY - STATE - ZIP	PHONE - EMAIL
OWNER:			
CONTRACTOR:			
PLANS By:			
CONTACT PERSON:			

**4. PERMIT APPLICATION FOR:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> New Building                 | <input type="checkbox"/> Shed Structure SQ. FT. _____            | <input type="checkbox"/> Utility structure              |
| <input type="checkbox"/> Alteration which floor _____ | <input type="checkbox"/> Roofing, structural                     | <input type="checkbox"/> Fence                          |
| <input type="checkbox"/> Addition                     | <input type="checkbox"/> Fire Protection: New ___ Existing _____ | <input type="checkbox"/> Sign                           |
| <input type="checkbox"/> HVAC (check all that apply)  | Type: _____  | <input type="checkbox"/> Ground                         |
| Furnace: New ___ No. of units _____                   | <input type="checkbox"/> Pool                                    | <input type="checkbox"/> Wall                           |
| Replacement ___ No. of units _____                    | <input type="checkbox"/> Repairs, without plans                  | <input type="checkbox"/> Projecting                     |
| Fuel Type: Gas ___ Elect ___ Other ___                | (attach detail sheet of repairs)                                 | <input type="checkbox"/> New business certificate       |
| All new ductwork Yes ___ or No ___                    | <input type="checkbox"/> Wrecking, demolish                      | <input type="checkbox"/> ENG. change to existing permit |
| Air Condition ___ No. of units _____                  | <input type="checkbox"/> Deck                                    | <input type="checkbox"/> # _____                        |
| Fireplace/ Other _____                                | With roof: Yes ___ or No ___                                     | <input type="checkbox"/> Other:                         |
| Chimney Liner required: Yes or No                     | <input type="checkbox"/> Retaining wall                          | <input type="checkbox"/> Explain Below Item 9           |
| <input type="checkbox"/> Garage                       | Length _____   |   |
| Attached _____ Detached _____                         | Max Height _____   |   |

5. ENERGY CONSERVATION: ALL STRUCTURES HEATED AND/ OR COOLED SHALL CONFORM TO THE REQUIREMENTS OF CHAPTER 11 OF THE RESIDENTIAL CODE OF OHIO (RCO).

6. MECHANICAL INFORMATION: ALL HEATING EQUIPMENT SHALL BE SIZED TO ACHIEVE AND MAINTAIN AN INSIDE TEMPERATURE OF 68 DEGREES F AT 36 INCHES ABOVE THE FLOOR (IN ALL HABITABLE ROOMS) WHEN THE OUTSIDE TEMPERATURE IS 60 DEGREES F

7. Existing Use Groups: \_\_\_\_\_ Proposed Use Group: \_\_\_\_\_ Type of Construction \_\_\_\_\_

Project Area Total Sq. Ft \_\_\_\_\_ Unfinish Sq. Ft \_\_\_\_\_ Finish Sq. Ft \_\_\_\_\_ Garage Sq. Ft \_\_\_\_\_

8. COST: Estimated cost of improvement for which this application is being made: \$ \_\_\_\_\_ .00

9. Description of work : \_\_\_\_\_

**10. APPLICANT CHECKLIST**

- A site plot plan with existing and proposed changes has been included.
- Four sets of plans are required to be submitted for review.
- Please fill out application completely.     **FORM MUST BE FILLED OUT COMPLETELY TO BE ACCEPTED AND PROCESSED**

The owner of this building and undersigned, do hereby covenant and agree with all the laws of the State of Ohio and the ordinances of the City of Loveland pertaining to building(s), and to construct the proposed building(s) or structure(s) or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and call for required inspections and certify that the information and statements given on this application, drawings and specifications to the best of their knowledge, true and correct.

**NOTE: FILING THIS APPLICATION DOES NOT CONSTITUTE PERMISSION TO BEGIN WORK**

Application by \_\_\_\_\_ Date \_\_\_\_\_  
 Owner or Agent's Signature